

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smc		7/12/01
O.I.P.E. CLASSIFIER		80	7/18
FORMALITY REVIEW	Lil	649.37	13/09/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	2/4/64
1	
2	
3	✓
4	
5	✓
6	✓
7	/
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9	✓
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17	✓
18	✓
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21	✓
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24	✓
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30	✓
31	✓
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34	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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